

## FALL COED ULTIMATE 2006

### LEAGUE CLASSIFICATION

Name of Team\_\_\_\_\_

Name of Team last SPRING if different\_\_\_\_\_

New Team\_\_\_\_\_ OR

Returning 2005 Fall Team\_\_\_\_\_ (at least 5 players from one 2005 Fall team)

If Returning Team: # of returning players\_\_\_\_\_

#### **League Preference**

Leagues: (circle one) Wednesday "A", Sunday "B-1", Sunday "B-2", Sunday "C"

#### **Level of Competition**

Competitive \_\_\_\_\_ Semi-competitive \_\_\_\_\_ Recreational \_\_\_\_\_

Other team information\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### **League Classification Policies**

The City of Eugene Athletics Program cannot guarantee that teams will be placed in the league of their choosing. If your team is placed in a league which is not desirable, monies will be refunded only if a replacement team can be found. Final decisions will be made by the Recreation Athletics Staff.

I have read and understand the above statement.

\_\_\_\_\_

Team Manager's Signature

